

Claims Processing

How To Access Claims

Use the **Claims Menu** to access CACFP claim functions, view current claim rates, and view payment summaries.

Site Abbreviations:

CC- Child Care

AC- Adult Care

OH- Outside School Hours

AR- At Risk

HS- Head Start

ES- Emergency Shelter/Homeless

To Add An Original Claim

- Select **Claims** on the blue menu bar.



- Select **Claim Entry-Centers**.
- Family Day Care Homes (FDCH) will select Claim Entry - DCH.

Child and Adult Care Food Program

Colorado Department of Public Health and Environment

Applications | Claims | Reports | Security | Search | Year | Help | Log Out

Claims > Program Year: 2013 - 2014

Item	Description
Claim Entry - Centers	Center Claim Entry (Breakfast, Lunch, Supper, Supplements)
Claim Entry - DCH	DCH Claim Entry (Breakfast, Lunch, Supper, Supplements)
Claim Rates - Centers	Adult and Child Care Center Claim Rates - View current claim rates
Claim Rates - DCH	Day Care Home Provider Claim Rates - View current claim rates
Payment Summary	Payment Summary

Claim Year Summary

- **Select** Claim Month. Claims may only be submitted after that month has passed.
- **Note:** Make sure you are in the correct Fiscal Year.

Claims > Claim Year at a Glance - Centers > Program Year: 2014 - 2015

Child & Adult Care Food Program Claim Year Summary for 2014 - 2015

0010621 Status: Active
Child Care Claims Test
DBA:
689 W Orange Street
Denver, CO 80000
Type of Agency: For Profit Organization
Agreement Type: Institution of Affiliated Sites

Claim Month	Adj Number	Claim Status	Date Received	Date Processed	Earned Amount
Oct 2014					\$0.00
Nov 2014					\$0.00
Dec 2014					\$0.00
Jan 2015					\$0.00
Feb 2015					\$0.00
Mar 2015					\$0.00
Apr 2015					\$0.00
May 2015					\$0.00
Jun 2015					\$0.00
Jul 2015					\$0.00
Aug 2015					\$0.00
Sep 2015					\$0.00
Year to Date Totals					\$0.00

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Claim Month Details

- Select **Add Original Claim** to begin the claims process.

The screenshot shows the 'Child and Adult Care Food Program' interface. The header includes the Colorado Department of Public Health and Environment logo and navigation links. The main content area displays 'Child & Adult Care Food Program Claim Month Details for October 2013'. Below this, a box contains information for '0010621 Status: Active Child Care Claims Test', including DBA, address, and agency type. A section for 'Claim Month: October 2013' features a table with columns: Claim Items, Adj Number, Date Received, Date Accepted, Date Processed, Earned Amount, and Status. The table body contains the text 'There are no claims for this month.' and a 'Total Earned' of '\$0.00'. At the bottom, there are '< Back' and 'Add Original Claim' buttons.

Claim Items	Adj Number	Date Received	Date Accepted	Date Processed	Earned Amount	Status
There are no claims for this month.						
Total Earned					\$0.00	

Claim Site List

- Select **Add** to enter the claim information.
- The screen shot below is an example of a Sponsor of Centers listing all of the sites under the Institution. Independent centers will only have one site.

The screenshot shows the 'Child and Adult Care Food Program' interface for 'Claim Site List for November 2013'. It includes the same header and organization information as the previous screenshot. Below the organization info, there is a table with columns: Month/Year Claimed, Adjustment Number, Date Received, Date Accepted, Date Processed, and Reason Code. The table shows 'Nov 2013' and '0'. Below this, an 'Actions' table lists sites with columns: Actions, Site #, Site Name, Type, Errors, and Status. The 'Add' button in the first row is highlighted. At the bottom, there are '< Back', 'Continue', and 'Upload Claim Data' buttons.

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Nov 2013	0				

Actions	Site #	Site Name	Type	Errors	Status
Add	0001	Site 1	OS		
Add	0002	Site 2	CC AR		
Add	0003	Site 3	CC HS		

Site Claim Report for the Claim Month and Year

Child and Adult Care Food Program

Colorado Department of Public Health and Environment

Applications | Claims | Reports | Security | Search

Year | Help | Log Out

Claims > Claim Year at a Glance - Centers >

Program Year: 2013 - 2014

VIEW | MODIFY | DELETE

**Child & Adult Care Food Program
Site Claim Report for November 2013**

0010621 Status: Active
Child Care Claims Test
DBA:
689 W Orange Street
Denver, CO 80000
Type of Agency: For Profit Organization
Agreement Type: Institution of Affiliated Sites

0002 Status: Active
SITE 2
158 W Acadia Blvd
Denver, CO 80000

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Nov 2013	0				

Attendance Reporting:

The following information is for Child Care centers or Adult Day Care centers. Directions for Head Start, At-risk, and Emergency Shelters/Homeless claim information is found in a separate section.

Total Days of Operation

- Enter the number of days the center served meals during the claim month.

Total Attendance

- Enter the total number of participants that participated in at least one meal or snack for each day.
- Use the Records of Meals (ROMS) to determine total attendance.

Average Daily Attendance

- This number is automatically calculated.

Child Care Center		Adult Care Center	
Attendance Reporting		Attendance Reporting	
	Quantity		Quantity
C1. Total Days of Operation:	<input type="text" value="0"/>	A1. Total Days of Operation:	<input type="text" value="0"/>
C2. Total Attendance:	<input type="text" value="0"/>	A2. Total Attendance:	<input type="text" value="0"/>
C3. Average Daily Attendance:	0	A3. Average Daily Attendance:	0
C4. Number of Shifts:	1	A4. Number of Shifts:	2

Number of enrolled participants in each reimbursement category

For Child Care Centers

- Enter the quantity based on how many children are categorized as free, reduced, or paid according to the completed Income Eligibility Forms (IEFs).
- This information is not required for Head Start, At-risk, or Emergency Shelter/Homeless sites. There are separate sections to input this information for those sites.

Number of enrolled participants in each reimbursement category	
	Quantity
C5. Free Category:	<input type="text" value="0"/>
C6. Reduced Category:	<input type="text" value="0"/>
C7. Paid Category:	<input type="text" value="0"/>
C8. Total Enrolled:	0

For Adult Day Care Centers

- Enter the quantity based on how many participants are categorized as free, reduced, or paid according to the completed Income Eligibility Forms (IEFs).

Number of enrolled participants in each reimbursement category	
	Quantity
A5. Free Category:	<input type="text" value="0"/>
A6. Reduced Category:	<input type="text" value="0"/>
A7. Paid Category:	<input type="text" value="0"/>
A8. Total Enrolled:	0

For-profit Centers Only

Only For-profit Child Care centers or For-profit Adult Day Care centers will be required to enter for-profit eligibility status.

The screen shot below is an example for Child Care centers.

- Line C10 is automatically calculated from the information entered in the section titled "Number of enrolled participants in each category."
- Enter the number of children eligible for CCAP reimbursement.

For Profit Centers Only			
	Quantity		
C9. License Capacity:	100		
C10. Free/Reduced Eligibility:	0	Eligibility:	0.0000 %
C11. Number of Title XX (CCAP):	<input type="text"/>	Eligibility:	0.0000 %
<input type="checkbox"/> Site is not claiming			
NOT Qualified			

The screen shot below is an example for Adult Day Care centers.

- Enter 0 for line A9 (No license is required for ADC.)
- Line A10 is automatically calculated from the information entered under the section “Number of enrolled participants in each reimbursement category.”

For Profit Centers Only

	Quantity		
A9. License Capacity:	0		
A10. Free/Reduced Eligibility:	0	Eligibility:	0.0000 %
A11. Title XIX/Title XX:		Eligibility:	0.0000 %
<input type="checkbox"/> Site is not claiming			

NOT Qualified

Meals and Snacks Served

For Child Care centers

- Input the following information based on the total calculations from the Records of Meals served for the claim month.

Child Meals / Snacks Served

	Free (A)	Reduced (B)	Paid (C)	Total (A + B + C)
C12. Breakfast:	0	0	0	0
C13. AM Snack:	0	0	0	0
C14. Lunch:	0	0	0	0
C15. PM Snack:	0	0	0	0
C16. Supper:	0	0	0	0
C17. Late Snack:	0	0	0	0

For Adult Day Care centers

- Input the following information based on the total calculations from the Records of Meals served for the claim month.

Adult Meals / Snacks Served

	Free (A)	Reduced (B)	Paid (C)	Total (A + B + C)
A9. Breakfast:	0	0	0	0
A10. AM Snack:	0	0	0	0
A11. Lunch:	0	0	0	0
A12. PM Snack:	0	0	0	0
A13. Supper:	0	0	0	0
A14. Late Snack:	0	0	0	0

Select **Save** when all the information is entered.

Save	Cancel
VIEW MODIFY DELETE	

For At-risk sites

This section will be visible if the site is approved as At-risk.

- At-risk meals are only claimed during the school year or non-school days, such as weekends, holidays, or school vacations during the regular school year.
- An at-risk afterschool center may not claim meals or snacks during the summer, unless it is located in the attendance area of a school operating on a year-round calendar.
- Please contact CACFP for clarification.

At Risk	
Attendance Reporting	
	Quantity
AR1. Total Days of Operation:	<input type="text" value="0"/>
AR2. Number of Enrolled (Free):	<input type="text" value="0"/>
AR3. Total Attendance:	<input type="text" value="0"/>
AR4. Average Daily Attendance:	0
AR5. Number of Shifts:	1
At Risk Meals / Snacks Served	
	Free
AR6. Breakfast:	<input type="text" value="0"/>
AR7. AM Snack:	0
AR8. Lunch:	<input type="text" value="0"/>
AR9. PM Snack:	<input type="text" value="0"/>
AR10. Supper:	<input type="text" value="0"/>
AR11. Late Snacks:	0

Head Start

If the site is a Head Start site, or if Head Start children are mixed in with Child Care center children, the Head Start children need to be totaled and input separately into the information fields below.

Head Start

Attendance Reporting

	Quantity
H1. Total Days of Operation:	<input type="text" value="0"/>
H2. Total Attendance:	<input type="text" value="0"/>
H3. Average Daily Attendance:	0
H4. Number of Shifts:	1

Head Start Meals / Snacks Served

	Free
H5. Breakfast:	<input type="text" value="0"/>
H6. AM Snack:	<input type="text" value="0"/>
H7. Lunch:	<input type="text" value="0"/>
H8. PM Snack:	<input type="text" value="0"/>
H9. Supper:	<input type="text" value="0"/>
H10. Late Snack:	<input type="text" value="0"/>

Emergency Shelter/Homeless

Emergency Shelter

Attendance Reporting

	Quantity
E1. Total Days of Operation:	<input type="text" value="0"/>
E2. Total Attendance:	<input type="text" value="0"/>
E3. Average Daily Attendance:	0
E4. Number of Shifts:	1

Emergency Shelter Meals / Snacks Served

	Free
E5. Breakfast:	<input type="text" value="0"/>
E6. AM Snack:	<input type="text" value="0"/>
E7. Lunch:	<input type="text" value="0"/>
E8. PM Snack:	<input type="text" value="0"/>
E9. Supper:	<input type="text" value="0"/>
E10. Late Snack:	<input type="text" value="0"/>

Outside School Hours

If the site is participating as an Outside School Hours, enter the information from the Record of Meals here.

Claims > Claim Year at a Glance - Centers >
Program Year: 2013 - 2014

VIEW | MODIFY | DELETE

Child & Adult Care Food Program Site Claim Report for September 2014

0010621 Status: Active
Child Care Claims Test
DBA:
689 W Orange Street
Denver, CO 80000
Type of Agency: For Profit Organization
Agreement Type: Institution of Affiliated Sites

0001 Status: Active
SITE 1
44 Main Street
Denver, CO 80000

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Sep 2014	0	10/20/2014			Original

Outside School Hours

Attendance Reporting

	Quantity
01. Total Days of Operation:	0
02. Total Attendance:	0
03. Average Daily Attendance:	0
04. Number of Shifts:	1

Number of enrolled participants in each reimbursement category

	Quantity
05. Free Category:	0
06. Reduced Category:	0
07. Paid Category:	0
08. Total Enrolled:	0

For Profit Centers Only

	Quantity			
09. License Capacity:	77			
010. Free/Reduced Eligibility:	0	Eligibility:	0.0000	%
011. Number of Title XX (CCAP):	0	Eligibility:	0.0000	%

☒ Site is not claiming
NOT Qualified

Outside School Hours Meals / Snacks Served

	Free (A)	Reduced (B)	Paid (C)	Total (A + B + C)
012. Breakfast:	0	0	0	0
013. AM Snack:	0	0	0	0
014. Lunch:	0	0	0	0
015. PM Snack:	0	0	0	0
016. Supper:	0	0	0	0
017. Late Snack:	0	0	0	0

Submitting the Claim

- Select **Continue** after all claim information has been entered for all site(s).
- The **Modify** button is available for any changes.
- The **Validated** status indicates that the claim has no errors and to continue with submitting the claim.

Child & Adult Care Food Program Claim Site List for November 2013

0010621 Status: Active
Child Care Claims Test
DBA:
689 W Orange Street
Denver, CO 80000
Type of Agency: For Profit Organization
Agreement Type: Institution of Affiliated Sites

Month/Year Claimed	Adjustment Number	Date Received	Date Accepted	Date Processed	Reason Code
Nov 2013	0				

Actions	Site #	Site Name	Type	Errors	Status
View Modify	0001	Site 1	OS		Validated
View Modify	0002	Site 2	CC AR		Validated
View Modify	0003	Site 3	CC HS		Validated

[< Back](#)[Continue](#)[Upload Claim Data](#)[DELETE](#)

- Read the **Certification statement**.
- **Check** the box certifying you read the Certification Statement.
- Select **Submit For Payment**.

Note: Only individuals with a valid CACFP User ID are allowed to submit a claim. Please read the certification statement carefully. Using another individual's User ID to submit a claim is not allowed. Contact the CACFP office to request a User ID and Computer User Authorization Form.

Certification

☐

I certify that the information on this voucher is true and correct to the best of my knowledge; that records are available to support this claim; and that it is in accordance with the terms of existing agreement and payment has not been received. I understand that this information is being given in connection with the receipt of federal funds and that deliberate misrepresentation may subject me to prosecution under applicable state and federal statutes.

[< Back](#)[Submit For Payment](#)

Claim Year Summary

The **Claim Year Summary** summarizes information regarding the claim for each claim month in the designated year.

Adj Number

- Identifies the number of revisions associated with the claim. Each revision must be re-processed by the state.

Claim Status

- Identifies the current status of the claim. If the claim is submitted without any errors, the **Accepted** status will be visible under the column **Claim Status**.

Date Received

- Identifies the date the system initially received the claim submission.
- Note:** Only the state has the authority to modify this date.

Date Processed

- Identifies the date the claim was included in the payment batch process.

Earned Amount

- Identifies the current value of the claim.

Child & Adult Care Food Program Claim Year Summary for 2013 - 2014

0010618 Status: Active

non profit test indep

DBA:

1234 State Street

Denver, CO 90000

Type of Agency: Private Non Profit Organization

Agreement Type: Independent Center

Claim Month	Adj Number	Claim Status	Date Received	Date Processed	Earned Amount
Oct 2013					\$0.00
Nov 2013					\$0.00
Dec 2013					\$0.00
Jan 2014					\$0.00
Feb 2014					\$0.00
Mar 2014					\$0.00
Apr 2014					\$0.00
May 2014					\$0.00
Jun 2014					\$0.00
Jul 2014					\$0.00
Aug 2014	0	Processed	10/30/2014	10/30/2014	\$1,318.24
Sep 2014					\$0.00
Year to Date Totals					\$1,318.24

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To Modify An Un-Processed Claim

If the claim has not been processed and is still in **Accepted** status, select **Modify** to make revisions to the claim.

- Update the claim information and select **Save**.

Claims > Claim Year at a Glance - Centers > Program Year: 2013 - 2014

Child & Adult Care Food Program
Claim Month Details for September 2014

0010621 Status: Active
Child Care Claims Test
DBA:
689 W Orange Street
Denver, CO 80000
Type of Agency: For Profit Organization
Agreement Type: Institution of Affiliated Sites

Claim Month: September 2014

Claim Items	Adj Number	Date Received	Date Accepted	Date Processed	Earned Amount	Status
View Modify Summary	0	10/20/2014	10/30/2014		\$177.14	Accepted
Total Earned					\$177.14	

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- The status now shows **Validated**.
- Select **Continue**.

Actions	Site #	Site Name	Type	Errors	Status
View Modify	0001	Site 1	OS		Validated
View Modify	0002	Site 2	CC AR		Approved
View Modify	0003	Site 3	CC HS		Approved

< Back **Continue** Upload Claim Data

DELETE

- Review the claim information.
- To make a modification or correction, select the **<Back** button to return to the **Claim for Reimbursement** screen.

- To submit the claim, check the **Certification** box.
- Select **Submit for Payment**.

Certification

☐ I certify that the information on this voucher is true and correct to the best of my knowledge; that records are available to support this claim; and that it is in accordance with the terms of existing agreement and payment has not been received. I understand that this information is being given in connection with the receipt of federal funds and that deliberate misrepresentation may subject me to prosecution under applicable state and federal statutes.

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Submit For Payment

To Revise A Processed Claim

- Claim revisions that result in a downward adjustment may be submitted at any time.
- Claim revisions that result in an upward adjustment may be submitted if the date of submission is within 30 days of the last day of the original claim month.
- Revised claims must be re-processed by the state regardless of their original status.
- Select **Add Revision**.

Child & Adult Care Food Program Claim Month Details for April 2014

0010626 Status: Active
Adult Claims Test FP
DBA:
678 w 3rd Ave
Denver, CO 80000
Type of Agency: For Profit Organization
Agreement Type: Institution of Affiliated Sites

Claim Month: April 2014

Claim Items	Adj Number	Date Received	Date Accepted	Date Processed	Earned Amount	Status
View Summary	0	07/23/2014	07/23/2014	07/25/2014	\$1,320.89	Processed
Total Earned					\$1,320.89	

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Add Revision

- If the Institution is performing site-level claiming, the **Claim Site List** screen displays.
- Locate the site name to revise and select **Revise**. The **Claim for Reimbursement** screen displays.

Actions	Site #	Site Name	Type	Errors	Status
View Revise	0001	Site 1	AC		Paid
View Revise	0002	Site 2	AC		Paid

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Continue

Upload Claim Data

DELETE

- Make any necessary changes to the claim.
- Select **Save**. The **Claim Month Details** screen displays.
- Review the information.
- To make a modification or correction to the claim, select the **<Back button** to return to the **Claim for Reimbursement** screen.
- To submit the revised claim, check the **Certification** box.
- Select the **Submit for Payment** button.